

	File with City or Town Clerk or Election Commissio
Fill in Reporting Period dates: Beginning Date:	1/2022 Ending Date: 4/29/2022
Type of Report: (Check one)	
	☐ 30 day after election ☐ year-end report ☐ dissolution
CATHERINE M. BILOTTA	
Candidate Full Name (if applicable)	Committee Name
SELECTMAN - MANCHESTER-BY-THE-SEA	Name of Committee Treasurer
21 PINE ST, # 9, MANCHE STER, MA  Residential Address  B-mail bilottc. home e gmail. com	Committee Mailing Address E-mail.
Phone # (optional):	Phone # (optional)
Глопе и (орцопа).	rione // (optional).
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	587,50
Line 3: Subtotal (line 1 plus line 2)	587,50
Line 4: Total expenditures this period (page 5, line	e 14) 587,50·
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (pag	.ge 6) O
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best o activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind co finance activity of all persons acting under the authority or on behalf of this committee in ac	contributions and liabilities for this reporting period and represents the campaign
Signed under the penalties of perjury:	(Freasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	x only)
Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the b activity, of all persons acting under the authority or on behalf of this committee in account incurred any liabilities nor made any expenditures on my behalf during this reporting p	cordance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the b finance activity, including contributions, loans, receipts, expenditures, disbursements, i campaign finance activity of all persons acting under the authority or on behalf of this  Stened under the penalties of perjury:	, in-kind contributions and liabilities for this reporting period and represents the scandidate in accordance with the requirements of M.G.L. c. 55.

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to

report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/19/2022	CATHERINE M. BILOTTA 21 PINE ST, 49, MANCHESTER	4300	RETIRED (CANDIDATE)
	X T T T T T MA		(CAODIDINE)
Line 9: Total Receip	ots over \$50 (or listed above)	587,50	
Line 10: Total Receip	pts \$50 and under* (not listed above)	0	
Line 11: TOTAL RI	ECEIPTS IN THE PERIOD	587,50	← Enter on page 1, line 2

If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

report all expenditures. Please include your committee name and a page number on each page.)

	To Whom Paid	nittee name and a page number on		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
		Tals BENVINGTON ST.		FRO 57
4/19/2022	PRINT BOSTON	BOSTON, MA 02128	LAWN SIGNS	587,50
		15051010/11/11/02/25		
1				11
				ll .
[ ]				
		Line 12, Total Person diament	on \$50 (on linted to 1)	(280 C)
		Line 12: Total Expenditures over	er above)	587,50
		Line 13: Total Expenditures \$50	and under* (not listed above)	0
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	587,50
Caran hava itam	rived armondituess of \$50 and under	include them in line 12. Line 12 ab	iould include only those expenditur	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

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### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			-	
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	0

<sup>•</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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### **SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	O

Page 7

<del>翻场场外都场沿线里加速打造的过去式和过去分词。</del>



01 Massaciluscus	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 01/0:	1/2022 Ending Date: 04/29/2022
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Jeffrey Bodmer-Turner	20 A
Candidate Full Name (if applicable) Select Board Member	Committee Name
Office Sought and District  89 School Street, Manchester-by-the-Sea MA 01944	Name of Committee Treasurer
Residential Address  E-mail:bodmerjbt@comcast.net	E-mail:
Phone # (optional): (978) 397-0402	Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	4850 (Ch) A
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, lin	
Line 5: Ending Balance (line 3 minus line 4)	0-405
Line 6: Total in-kind contributions this period (pa	age 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: American Express C	Credit Card
Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind a linance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	
Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in actincurred any liabilities nor made any expenditures on my behalf during this reporting	e best of my knowledge and belief, a true and complete statement of all campaign finance coordance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this	s, in-kind contributions and liabilities for this reporting period and represents the
ligned under the penaltics of perjury:	Date: 05/09/2022

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
04/20/2022	Jeffrey Bodner-Turger 89 School Street Wardester MA 01949		Retired
Line 9: Total Recei	pts over \$50 (or listed above)	\$485.00	
Line 10: Total Recei	pts \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD	\$485,00	← Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Doto D-11	To Whom Paid	4.33	D. CT	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
04/20/2022	Print Boston	1218 Bennington St, Boston, MA 02128	campaign signs	485
		Line 12: Total Expenditures over	er \$50 (or listed above)	
		Line 13: Total Expenditures \$50	and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	485

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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### Form CPF M 102: Campaign Finance Report

### Municipal Form

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	3/29/2c Ending Date: 5/9/22
Type of Report: (Check one)	The second control of
	[7] 20 June Open Aportion [7] Common and general [7] Jimelation
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Eniz Brattand	School Committee
Candidate Full Name (if applicable)	Committee Name
School Comm, Hee	Name of Committee Treasurer
32 O'A Essax RJ.	Name of Commune Treasurer
Residential Address	Committee Mailing Address
E-mail: ERICBRADFORD@GNAIL, COM	E-mail:
Phone # (optional):	Phone # (optional):
,	
SHMMADV BALAN	CE INFORMATION:
SUMMARI BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	O
Line 2: Total receipts this period (page 3, line 1)	
Line 3: Subtotal (line 1 plus line 2)	0
Line 4: Total expenditures this period (page 5, li	ne 14) 653.25
Line 5: Ending Balance (line 3 minus line 4)	ne 14) 653. 25 - 653. 25
Line 6: Total in-kind contributions this period (p	age 6)
Line 7: Total (all) outstanding liabilities (page 7	
Line 8: Name of bank(s) used:	~/A
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-king linance activity of all persons acting under the authority or on behalf of this committee i	I contributions and liabilities for this reporting period and represents the campaign
	(Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 h	oox only)
	ne best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contribution ag period that are not otherwise disclosed in this report.
Candidate without Committee  Certify that I have examined this report including attached schedules and it is, to the tinance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting order the authority of on behalf of the companion of the contributions.	is, in-kind contributions and faotimes for this reporting period and represents the

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

	Name and Residential Address		Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
4/27/22	\$4.3 t old Break Rel. 019 79	122.00	
5/6/22	Eric Braffe J. 32 old Essex Rd. Manches der MA 01944	531.25	Software Architect Am & Agency
Line 9: Total Receip	ots over \$50 (or listed above)	\$653.25	
Line 10: Total Recei	pts \$50 and under* (not listed above)		
Line 11: TOTAL R	ECEIPTS IN THE PERIOD	\$653,25	← Enter on page 1, line 2
stre i i i i	to steen to to told the	0.1: 10.1.1	REAL PROPERTY AND THE RESIDENCE FOR

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

report all expend		nittee name and a page number on	each page.)	, , , , , , ,
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
5/6/22	Fastsighs	Usburn MA 01801	Sins	531.25
4/27/22	5/5/34 5	8000 Hashell Are. Von Noys CA 91466	Syns	\$122.00
	741			
	**************************************	Line 12: Total Expenditures over	er \$50 (or listed above)	653,25
		Line 13: Total Expenditures \$50	and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITE		653,25



# Form CPF M 102-0: Campaign Finance Report

Municipal Form
Office of Campaign and Political Finance

Please print or type all information, except signatures.

City or Town of: NANCHESTER - 34 - 7	te-sa		
Reporting Period: Beginning:	1) 22	Ending: 4/29	(/27
Type of Report: (Check One)			
8th day preceding preliminary/primary 8th day	8th day preceding election 30th day follow	30th day following election (town or special)	20th day of January (Year-End report)
Pursuant to M.G.L. Chapter 55:	Municipal Office		
1. I certify that I am a candidate for or currently hold Municipal Office. 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. 3. I certify that I do not have a political committee.	Municipal Office. made any expenditures, or incurred any obli	igations during this reporting period, and do	o not have a campaign fund in existence.
DATE PRINT NAME	SIGNATURE Signed under the penalties of perjury	RESIDENTIAL ADDRESS (Street and Number)	OFFICE SOUGHT
SAINAG MACES 22/6/5		23 BLYNMAN CIRCLE	LIBRARY TRUSTER



Office of Campaign and Political Finance

Reporting Period: Pursuant to M.G.L. Chapter 55: Type of Report: (Check One) City or Town of: 8th day preceding preliminary/primary 1. I certify that I am a candidate for or currently hold Municipal Office Manchesta Beginning: 8th day preceding election EPOP 10 MAD (MM/DD/YYYY) 30th day following election (town or special) Ending: 12027 Please print or type all information, except signatures. ☐ 20th day of January (Year-End report) (MM/DD/YYYY)

3. I certify that I do not have a political committee.

2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.

						5/2/22	DATE
						Many both	PRINT NAME
						- Mary and -	SIGNATURE Signed under the penalties of perjury
						1 Hask Dire	RESIDENTIAL ADDRESS (Street and Number)
					0	Taming Bard	OFFICE SOUGHT



Office of Campaign and Political Finance

Pursuant to M.G.L. Chapter 55: Type of Report: (Check One) Reporting Period: City or Town of: ☐ 8th day preceding preliminary/primary Manchester Beginning: 01/01/2022 8th day preceding election (MM/DD/YYYY) 30th day following election (town or special) Ending: 04/29/2022 Please print or type all information, except signatures. 20th day of January (Year-End report) (MM/DD/YYYY)

1. I certify that I am a candidate for or currently hold Municipal Office.

- 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
- 3. I certify that I do not have a political committee.

	05/02/2022	DATE
	Ronald Mastrogiacomo	PRINT NAME
May W Day Ball	Manual Mall	SIGNATURE Signed under the penaltic of perjury
	9 Masconomo St	RESIDENTIAL ADDRESS (Street and Number)
	Planning Board	OFFICE SOUGHT



of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	2022 Ending Date: 519122 4 29 2028
Type of Report: (Check one)  ☐ 8th day preceding preliminary  8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution
Candidate Full Name (if applicable)  School Multee Manchester  Office Sought and District  22 Waller Rd Manchester, MA  Residential Address  E-mail: Wisten Mclaughlin Cymail.com  Phone # (optional):	Committee Name  Name of Committee Treasurer  Committee Mailing Address  E-mail:  Phone # (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	$\varnothing$
Line 2: Total receipts this period (page 3, line 11	297.50
Line 3: Subtotal (line 1 plus line 2)	297.50
Line 4: Total expenditures this period (page 5, line	ne 14) 297.50
Line 5: Ending Balance (line 3 minus line 4)	Ø
Line 6: Total in-kind contributions this period (p	age 6) NA
Line 7: Total (all) outstanding liabilities (page 7)	NA
Line 8: Name of bank(s) used:	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the besactivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check I b	or only)
Candidate with Committee	ne best of my knowledge and belief, a true and complete statement of all campaign finance occordance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	ts, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature)

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

eport an receipts. I	Name and Residential Address	0	Occupation & Employer
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
4/25/22	Kristen McLaughlin 22 Waller Rd.	297.50	Attorney/self
	Manchesterina order		
	· · · · · · · · · · · · · · · · · · ·		
÷			
Line 9: Total Rece	eipts over \$50 (or listed above)		
	eipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
		e 9. Line 10 shou	ld include only those receipts not itemized above.  Page 2

### **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)		
Date Received	(m)massing is question				
•					
Line 9: Total Recei	pts over \$50 (or listed above)	297.50			
Line 10: Total Rece	ipts \$50 and under* (not listed above)				
Line 11: TOTAL RECEIPTS IN THE PERIOD   297.50 ← Enter on page 1, line 2					
If you have itemized	receipts of \$50 and under, include them in li	ne 9. Line 10 shou	ald include only those receipts not itemized above.		

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

	To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
	Signarama	75 High Street Danvers, MA 01923	yard signs	2.97.50		
		Line 12: Total Expenditures ov		297.50		
		Line 13: Total Expenditures \$50	297.50			
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	bould include only those expenditure	1		

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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### Candidate my

### Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

File with: City / Town Clerk or Election Commission

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

CANDIDATE:	Full Name: Lin Stev	Uclaughlin					
CANDIDATE	11010	10 1400 Pd					
	Residential Address: 22 W	MUTER MA MAYY					
	-AAJA-	201 277					
	E-Mail Address: Wisten McLaughlin Cymail COM Phone #: 978-233-1250						
	Party Affiliation:	(If applicable)					
OFFICE SOUG	HT/PURPOSE:						
	Title: School	I (ommittee					
	District:	hoster. by the sea					
		A.M. 14 Feb. 100 Company					
COMMITTEE:	Name of Committee:	ne name of the committee must include the candidate's last name)					
	Committee Mailing Address:	the name of the committee must include the callulate's last mainly					
	City / State / Zip:	Phone #:					
OFFICERS:							
Chairman:		Treasurer*:					
Residential Address:		Residential Address:					
City / State / Zip:		City / State / Zip:					
Phone #:		Phone #: Email:					
Thone w.		*A public employee may not serve as treasurer of any political committee (see reverse).					
Other Officer/Title:		Other Officer/Title:					
Residential Address:		Residential Address:					
City / State / Zip:		City / State / Zip:					
Phone #:		Phone #:					
	(Complete and attach a Form C	PF M A 101, if necessary, with other officers and finance committee, if any.)					
behalf. I am aware the relevant election.	hat candidates are required to keep det	d that a candidate shall not give consent to the organization of more than one committee on his/her illed accounts and records of all campaign finance activity for a period of six years from the date of Date:					
		Candidate's signature					
that: 1) I am subject	to certain duties and liabilities under M mpaign finance activity for a period of ployee, I must resign this position and	committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand .G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts six years from the date of the relevant election; 2) if after my acceptance of this office I become an notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political					
	HE PENALTIES OF PERJURY:	Date:					
		Treasurer's signature					
I hereby accept the o SIGNED UNDER T	ffice of Chairman of the above-named HE PENALTIES OF PERJURY:	committee.					
		Chairman's signature Date:					



	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 1/1,	Z2022 Ending Date: 4/29/2022
T CD (Cl 1)	
Type of Report: (Check one)	30 day after election year-end report dissolution
Anna Lin Mitchell  Candidate Full Name (if applicable)	Committee Name
MERSD School Committee	2 Commune Name
Office Sought and District	Name of Committee Treasurer
2 Brice Ln, Manchester by the sea, MA 01944	
Residential Address	Committee Mailing Address
E-mail mitchell.anna.lin@gmail.com	E-mail:
Phone # (optional):	Phone # (optional):
SUMMARY BALAN	CE INFORMATION:
SOMMET BIRDING	
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 1)	169.17
Line 3: Subtotal (line 1 plus line 2)	169.17
Line 4: Total expenditures this period (page 5, li	ne 14) 169.17
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (p	page 6) 0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used: Bank of America	
Affidavit of Committee Treasurer:	
I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee is	d contributions and liabilities for this reporting period and represents the campaign
Signed under the penalties of perjury:	(Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 t	pox only)
Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in a incurred any liabilities nor made any expenditures on my behalf during this reporting.	ne best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, and period that are not otherwise disclosed in this report.
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the second contributions.	its, in-kind contributions and liabilities for this reporting period and represents the his candidate in accordance with the requirements of M <sub>6</sub> G <sub>6</sub> L <sub>6</sub> c <sub>6</sub> 55
Signed under the penalties of perjury:	(Candidate's signature) Date: 5/4/2022

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

- opore air receipts.	Please include your committee name and a pa  Name and Residential Address	by mannor on th	
Date Received	(alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received		Amount	(101 Contributions of \$200 of more)
4/0/2022	Anna Lin Mitchell 2 Brice Ln	160 17	
4/8/2022	Manchester, MA 01944	169.17	
		1	
		1	
Line 9: Total Rece	ipts over \$50 (or listed above)	169.17	
Line 10: Total Rece	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD	169.17	← Enter on page 1, line 2
YC 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.)					
Data Data	To Whom Paid	A J.J.	D 26 F 214	A	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
4/8/2022	Imprint	online	lawn campaign signs	169.17	
70/2022				105.17	
				1	
ļ					
		ļ			
955		Line 12: Total Expenditures ov	er \$50 (or listed above)	169.17	
		Line 13: Total Expenditures \$50			
		Eme 13. Total Expenditures \$30	and under (not used above)		
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	169.17	
	. 3			L	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4



	File with: City or Town Clerk or Election Commission					
Fill in Reporting Period dates: Beginning Date: Jan 1,						
Type of Report: (Check one)						
	30 day after election year-end report dissolution					
Brian Sollosy						
Candidate Full Name (if applicable) Selectman	Committee Name					
Office Sought and District	Name of Committee Treasurer					
11 Central Street, Manchester, MA 01944  Residential Address	Oitte- Mailing Address					
E-mail: brian.sollosy@comcast.net	Committee Mailing Address E-mail:					
Phone # (optional): (978) 525-8770	Phone # (optional):					
SUMMARY BALANCE	E INFORMATION:					
Line 1: Ending Balance from previous report	0					
Line 2: Total receipts this period (page 3, line 11)	520.630					
Line 3: Subtotal (line 1 plus line 2)	0					
Line 4: Total expenditures this period (page 5, line	e 14) 520.63					
Line 5: Ending Balance (line 3 minus line 4)	0					
Line 6: Total in-kind contributions this period (page	ge 6) 0					
Line 7: Total (all) outstanding liabilities (page 7)						
Line 8: Name of bank(s) used: Cape Ann Savings Ba	ank					
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  Signed under the penalties of perjury:  (Treasurer's signature)  Date:						
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	anly					
Candidate with Committee	best of my knowledge and belief, a true and complete statement of all campaign finance ordance with the requirements of M.G.L. c. 55. I have not received any contributions,					
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the trinance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this Signed under the penalties of perjury:	in-kind contributions and liabilities for this reporting period and represents the					

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
419	BRIDG GOLLON 1) CELTRAL ST MANGHESTER, MID	520.63	WATSOLI BIZOTHOUS, LLC
Line 9: Total Receipts over \$50 (or listed above)		520.63	
Line 10: Total Recei	pts \$50 and under* (not listed above)		
	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid	Address	Durnosa of Francistance	A m. a4
Date Faid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Apr 19, 2022	Archmedia Solutions	11 Sylvan Street Danvers, MA 01923	Lawn Signs	520.6
		Line 12: Total Expenditures o	ver \$50 (or listed above)	520.6
		Line 13: Total Expenditures \$5	50 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	520.6

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4



File with: City or Town Clerk or Election Commission									
Fill in Reporting Period dates: Beginning Date: 1/1/22	Ending Date: 4/29/22								
Type of Report: (Check one)									
	30 day after election  year-end report dissolution								
atil day preceding preminiary	30 day after election year-end report dissolution								
Erica Spencer									
Candidate Full Name (if applicable)	Committee Name								
School Committee	Name of Committee Treasurer								
Office Sought and District  87 Pine St.	Name of Committee Treasurer								
Residential Address	Committee Mailing Address								
E-mail: etspencer@gmail.com	E-mail:								
Phone # (optional): 617 872 6770	Phone # (optional):								
SUMMARY BALANCE INFORMATION:									
Line 1: Ending Balance from previous report									
Line 2: Total receipts this period (page 3, line 11)									
Line 3: Subtotal (line 1 plus line 2)									
Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page 5, line 14)									
Line 5: Ending Balance (line 3 minus line 4)	0								
Line 6: Total in-kind contributions this period (pag	ge 6)								
Line 7: Total (all) outstanding liabilities (page 7)	371.88								
Line 8: Name of bank(s) used:									
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best cactivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind coffinance activity of all persons acting under the authority or on behalf of this committee in a	ontributions and liabilities for this reporting period and represents the campaign								
Signed under the penalties of perjury:	(Treasurer's signature) Date:								
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	only)								
Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting									
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represents the								
Signed under the penalties of perjury:	(Candidate's signature) Date: 5/4/22								

### **SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
4/25/22	Archimedia Solutions Group, Inc.	11 Sylvan St., Danvers, MA	Creation of lawn signs	371.88
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	371.88



Office of Campaign and Political Finance

Reporting Period: City or Town of: Manchester By The Sea Beginning: 01/01/2022 (AAAA/GG/WW) Ending: 04/29/2022 Please print or type all information, except signatures. WW/DD/YYYY

`	8th day preceding preliminary/primary	Type of Report: (Check One)
30th day following ele		
30th day following election (town or special)		

- 1. I certify that I am a candidate for or currently hold Municipal Office.
- 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.

  3. I certify that I do not have a political committee.

DATE  05/02/2022	PRINT NAME  Nadia Wetzler	SIGNATURE Signed under the penalties of perjury	RESIDENTIAL ADDRESS (Street and Number)  10 70KS H.// R.	OFFICE SOUGHT School Committee



Office of Campaign and Political Finance

City or Town of:	City or Town of: Manchester-by-the-Sea				Please print or type all information, except signatures.
Reporting Period:	Beginning: 01/01/2022		Ending:	Ending: 04/29/2022	
	4	(MM/DD/YYYY)			(MM/DD/YYYY)
Type of Report: (Check One)	ck One)				

## 8th day preceding preliminary/primary

- Pursuant to M.G.L. Chapter 55:
  - 🔀 8th day preceding election 30th day following election (town or special)
  - 20th day of January (Year-End report)

# 2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence. 3. I certify that I do not have a political committee. 1. I certify that I am a candidate for or currently hold Municipal Office.

- 6		 	 		 		
						05/09/22	DATE
						Alan Wilson	PRINT NAME
						Man William	SIGNATURE Signed under the penalties of perjury
						5 Spy Rock Hill	RESIDENTIAL ADDRESS (Street and Number)
						Moderator	OFFICE SOUGHT